Missouri Department of Health and Senior Services Summer Food Service Program

CNPWeb Information Sheet Update Instructions

2015

As of March 1, 2007 the Summer Food Service Program (SFSP) began using a online web-based system – CNP Web. This is intended to serve as a quick start guide and not a comprehensive explanation of the operation of the system.

Basic Application Procedures

- Go to https://dhssweb04.dhss.mo.gov/cnp
- Log in using your User ID and Password. If you do not have one or have forgotten it please contact our office at (888) 435-1464.



Missouri Department of Health & Senior Services

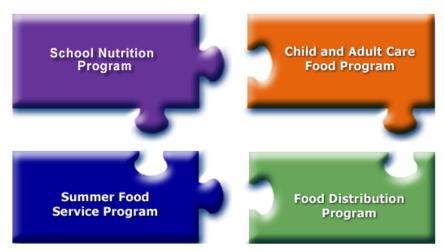
Community Food and Nutrition Assistance



Program Selection

- After a successful login, you will see four puzzle pieces. Select the blue Summer Food Service Program piece.

Note: If you participate in the Child and Adult Care Food Program, you will have access to either the SFSP or CACFP systems by choosing the appropriate puzzle piece.



Click on a puzzle piece above for the Child Nutrition Program you wish to access!

Exit Web Site

Notification Page

 This is where important SFSP information will be posted. This page will include links to instructions, forms, program news and updates. After carefully reading this page, click Continue.

Welcome to the Summer Food Service Program CNPWeb System

Note: It is critical that you review this page each time you log in for current information. This page may be used by SFSP program staff in lieu of sending e-mail updates or reminders to sponsors.

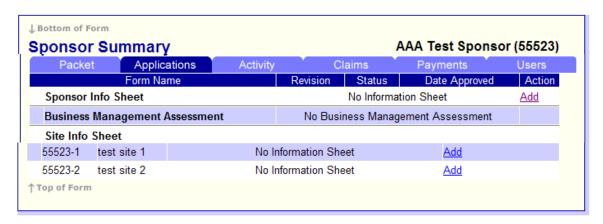
Program Year Selection

- Choose the appropriate program year (2015).

Program Year	Program Begin Date	Program End Date
2007	October 1, 2006	September 30, 2007
2008	October 1, 2007	September 30, 2008
2009	October 1, 2008	September 30, 2009
<u>2010</u>	October 1, 2009	September 30, 2010
<u>2011</u>	October 1, 2010	September 30, 2011
<u>2012</u>	October 1, 2011	September 30, 2012
<u>2013</u>	October 1, 2012	September 30, 2013
<u>2014</u>	October 1, 2013	September 30, 2014
<u>2015</u>	October 1, 2014	September 30, 2015

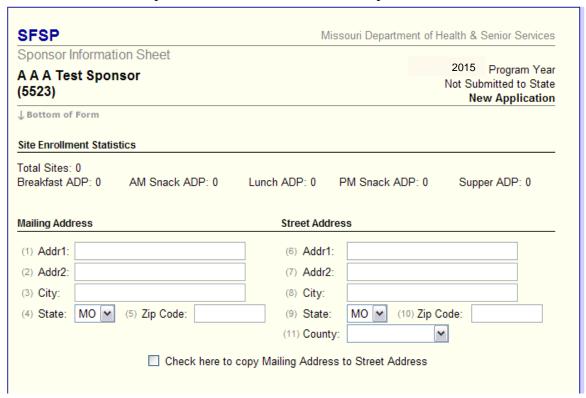
Sponsor Summary Page

Select the Applications Tab



Sponsor Information Sheet

- Click on Add next to Sponsor Information Sheet and complete



NEW! Responsible Individual (Formerly Authorized Representative)

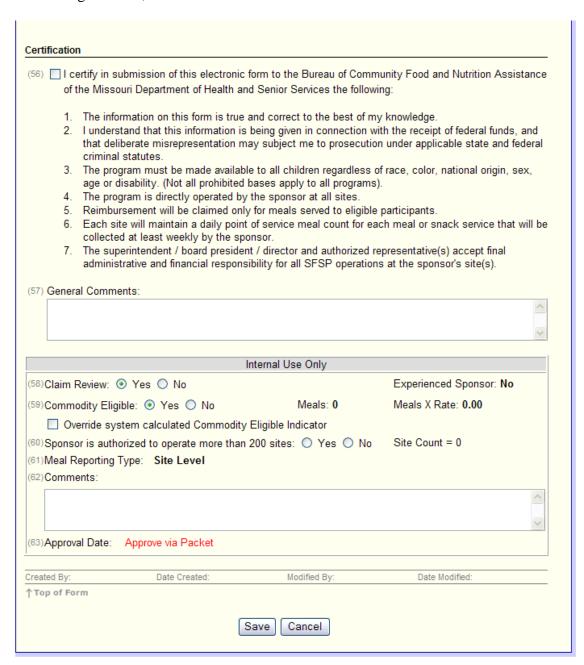
The <u>Responsible</u> Individual is an individual who has <u>final administrative and financial</u> <u>responsibility</u> for operating the Federal program under agreement with the Missouri Department of Health and Senior Services (MDHSS). This individual has signature authority for Summer Food Service Program (SFSP) operations and will be held responsible for any determination of serious deficiency in the operation of the Program.

esponsible Individual Fir	st MI Last	Food Program Contact First MI Last
2)Name:	St Wil Last	(20)Name: - Last
3)Title:		(21)Title:
4)E-mail:		(22)E-mail:
5)Phone:	(16) Ext:	(23)Phone: (24) Ext:
7)Fax:	(18) Ext:	(25)Fax: (26) Ext:
9)Contact's Address: Ma	ailing Address 🔻	(27)Contact's Address: Mailing Address 🔻

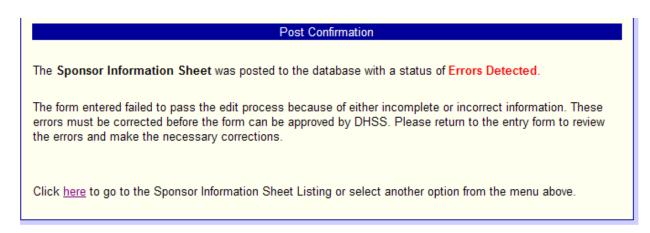
Sponsor Information Sheet

(Continued)

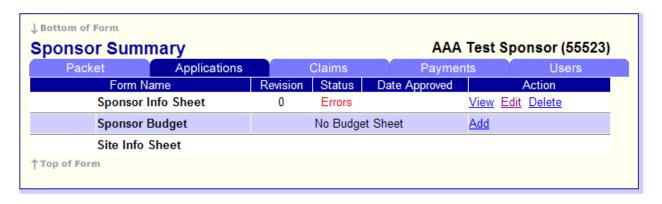
- You *must* check the Certification box (54) to submit your Sponsor Information Sheet. After checking that box, click save.



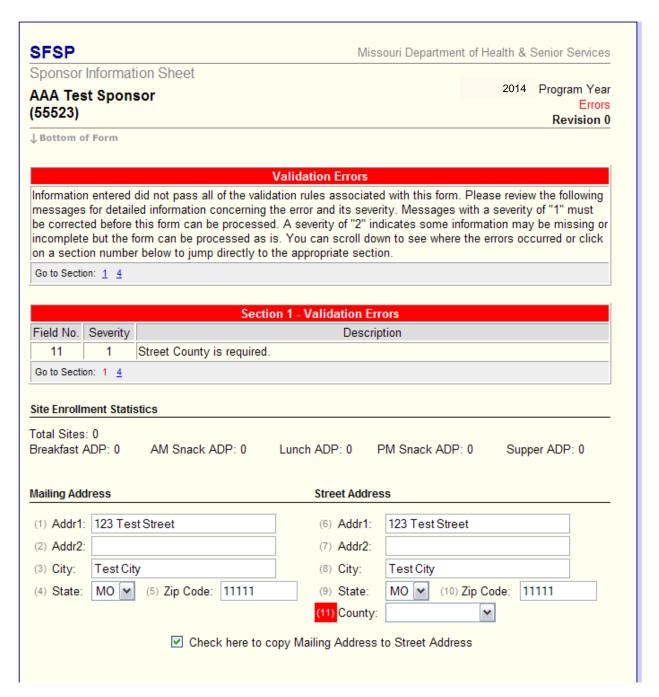
- If there are sponsor application errors, an error message will be generated with the error(s) highlighted.



- If there are errors click <u>here</u> on the Sponsor Info Sheet then click on Edit under the Action heading to the right of Sponsor Info Sheet.



- There will be a screen similar to the following, with the errors highlighted, will appear.

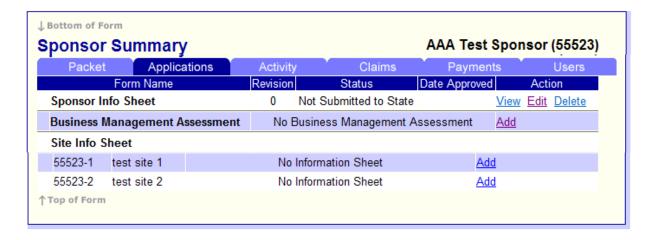


- Correct any errors, check the certification box and click Save

- At this point, you should see a Post Confirmation message that indicates that the Sponsor Information Sheet is in *Not Submitted to State* Status
- Click <u>here</u> to return to the Sponsor Summary



NEW! Business Management Assessment (BMA)



After the Sponsor Info Sheet has been completed, an <u>Add</u> will appear next to Business Management Assessment (BMA). Click <u>Add</u> to begin filling out the BMA.

NOTE! For-Profit and Not-For-Profit Corporations

On the Business Management Assessment, questions 29-32 are exclusively for **CORPORATIONS** – both for-profit and not-for-profit corporations.

IF you are a corporation, answer the questions appropriately.

IF you are <u>NOT</u> a corporation, Answer NO to all questions 29-32 and then enter "NA" in the comments box. If you skip these questions, you will get errors when trying to submit them.

For an explanation of the questions go to <u>ToolTips</u>.

Click Here for detailed instructions to complete the BMA.

For HELP or more information about why the BMA is now required, please go to the online BMA HELP.

If you have questions regarding the completion of this form, you may contact the DHSS Division of Administration at **573-751-6104** or via email (preferred) at **Monitoring@health.mo.gov**.

Sponsor Budget

- Click on <u>Add</u> next to Sponsor Budget, complete and press Save. <u>NOTE</u>: Public Schools are now exempt from entering a budget.

Packet Applic		cations	Claims	Payments	Users	
Form Name		Revision Status	Status	Date Approved	Action	
Sponsor Info Sheet		0	Not Submitted to State	1	View Edit Delete	
Sponsor Bud	lget	0	Not Submitted to State		View Edit Delete	
Site Info She	et					

- If there is a budget error, the error will be highlighted, similar to the Sponsor Info Sheet.
- Correct and Save
- At this point the Budget should be in *Not Submitted to State* Status as indicated above

Post Confirmation

The Sponsor Budget was posted to the database with a status of Not Submitted to State.

When you have completed entering all of the forms required, please submit them to DHSS for final approval.

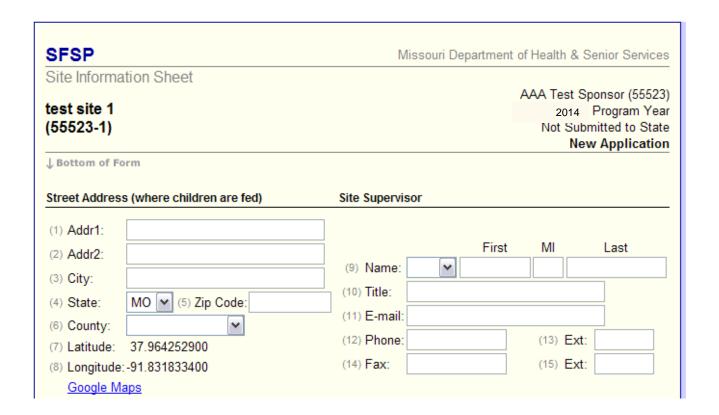
Click here to go to the Sponsor Budget Listing or select another option from the menu above.

- Click <u>here</u> to return to Sponsor Summary
- Your Sponsor Summary should now look like this:

Sponsor Summary				AAA Test Sponsor (5552			
Packet A		Applications	Claims	Payments		Users	
Forn	n Name	Revision	Status	Date Approved	Α	ction	
Sponsor I	nfo Sheet	0	Not Submitted to State	7	View Edit	<u>Delete</u>	
Sponsor I	Budget	0	Not Submitted to State	1	View Edit	<u>Delete</u>	
Site Info	Sheet						
55523-1	test site 1		No Information Sheet	t <u>/</u>	<u>Add</u>		
55523-2	test site 2		No Information Sheet	t <u>/</u>	Add		

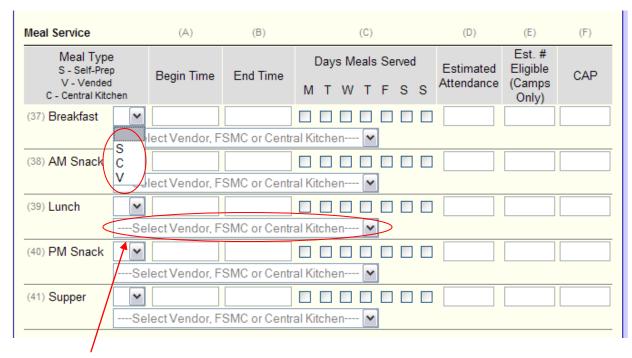
Site Information Sheet

- Click on Add next to Site Info Sheet and complete it.

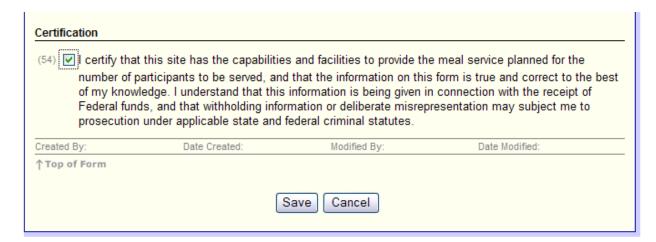


For each meal you are serving at your site, you must identify *which* vendor, FSMC or Central Kitchen is providing that meal. This is especially beneficial for those sponsor who may have multiple sources for single sites *AND* those have multiple sites with different food sources.

- In the first drop-down box, select whether the meal is Self-Prep (S), Vended (V), or Central Kitchen (C).



- If you selected Vended or Central Kitchen, you are required to select one of the food sources that you have entered on your *Sponsor Information Sheet*. You select that from the list in the drop-down list.
- Check certification box and click save.



- If there is a Site Info Sheet error(s), it will be highlighted. Correct and resave.
- The form must be in *Not Submitted to State* Status, then to continue, click <u>here</u> to return to Sponsor Summary

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Post Confirmation

The Site Information Sheet was posted to the database with a status of Not Submitted to State.

When you have completed entering all of the forms required, please submit them to DHSS for final approval.

Click here to go to the Site Information Sheet Listing or select another option from the menu above.

- Repeat above steps for additional sites.
- If there is a site not listed on the Sponsor Summary please submit a paper Site Information Sheet for each site you would like to add.
- If there is a site listed that needs removed please call 888-435-1464 for assistance.

	r Summa				or ope	onsor (55523
Packe	et	Applications	Claims	Payments		Users
Forn	n Name	Revision	Status	Date Approved		Action
Sponsor	Info Sheet	0	Not Submitted to State		View E	dit Delete
Sponsor Budget		0	Not Submitted to State		<u>View</u> E	<u> dit Delete</u>
Site Info	Sheet					
5523-1	test site 1	0	Not Submitted to State		View E	dit <u>Delete</u>
5523-2	test site 2		No Information Sheet		Add	

Packet

	Pac	ket Applications Claims	Payments	Users
em	Req	On-Line Forms Description	Count/Date	Status
1	*	Sponsor Information Sheet		Not Submitted to State
2	*	Sponsor Budget Form		Not Submitted to State
3	*	Site Information Sheet	2 of 2	Not Submitted to State
em	Req	Off-Line Forms Description	Date Sent	Date Date Received Complete
4	*	Geographical Boundary Map		
5		Documentation of 501(c)(3) Status		
6	*	Food Service Contract		
7		Enrollment Form		
8		Contract		
9	*	Notarized Affidavit		
10		Business Entity Certification		
11	*	E-Verify Memorandum of Understanding		
12	*	Nutritionist Pre-approval Visit		
13	*	New Sponsor Training Attendance		
14	*	Policy Statement		
15	*	Direct Deposit Form		
16	*	Vendor Input Form		
		orm marked with an "*" enter the date the form was sent to Sent" must be entered before the packet can be submitted		/al.
lick	<u>here</u>	to Update Dates on Off-Line Forms		

Once the Sponsor Information Sheet, Business Management Analysis, Sponsor Budget Form, and Site Information Sheet (for each site) are all complete:

- Select the Packet tab on the Sponsor Summary page
- Verify all On-Line Forms are in Not Submitted to State status
- Sponsors with a FSMC *must* complete this step. All other sponsors may ignore *UNLESS* there are items under "Off-Line Forms Description" that have an asterisk (*), click <u>here</u> to Update Dates on Off-Line Forms that are required (forms required for each sponsor will be highlighted by an asterisk (*), depending on sponsor type, vended vs. self-prep status, etc.).
- Sponsors who do not have an * under this column may skip this step. all returning sponsors don't have to do all those things listed.-the only thing that will show up is the FSMC one. (example on the next page)

em	Req	Form Description	Date Sent	Date Received	Date Complete
1		Geographical Boundary Map			
2		Documentation of 501(c)(3) Status			
3	*	Food Service Contract			
4		Enrollment Form			
5		Contract			
6		Notarized Affidavit			
7		Business Entity Certification			
8		E-Verify Memorandum of Understanding			
9		Nutritionist Pre-approval Visit			
10		New Sponsor Training Attendance			
11		Policy Statement			
12		Direct Deposit Form			
13		Vendor Input Form			

- Enter the date the document was submitted to CFNA in Date Sent box.
- Click Save

	Pac	or Summary ket Applications Claims	AAA Test Payments	Users	Ĺ
tem			Count/Date	Status	
1		Sponsor Information Sheet		Not Submitted State	to
2	*	Sponsor Budget Form		Not Submitted State	to
3	*	Site Information Sheet	2 of 2	Not Submitted State	to
tem	Req	Off-Line Forms Description	Date Sent	Date Dat Received Comp	
4	*	Geographical Boundary Map	3/1/2011		
5		Documentation of 501(c)(3) Status			
6	*	Food Service Contract	3/1/2011		
7		Enrollment Form			
8		Contract			
9	*	Notarized Affidavit	3/1/2011		
10		Business Entity Certification			
11	*	E-Verify Memorandum of Understanding	3/1/2011		
12	*	Nutritionist Pre-approval Visit	3/1/2011		
13	*	New Sponsor Training Attendance	3/1/2011		
14	*	Policy Statement	3/1/2011		
15	*	Direct Deposit Form	3/1/2011		
16	六	Vendor Input Form	3/1/2011		
∵ (Check	to Update Dates on Off-Line Forms there and click on the "Save" button below to submit form the forms have been submitted to the State Agency, no additional cha			
		Save			

- Check the box to "Save" and Save forms to the State for Approval and click Save.

	nso Pac	Ket Applications Claims Payments		Users		
tem	Req	On-Line Forms Description	Count/Date	Status		
1	*	Sponsor Information Sheet		Pending Approva		
2	*	Sponsor Budget Form		Pending Appro	val	
3	*	Site Information Sheet	2 of 2	Pending Approv		
4		Forms Submitted to State for Approval	2/9/2011	Pending Appro	val	
tem	Req	Off-Line Forms Description	Date Sent	Date Da Received Comp		
5	*	Geographical Boundary Map	3/1/2011			
6		Documentation of 501(c)(3) Status				
7	*	Food Service Contract	3/1/2011			
8		Enrollment Form				
9		Contract				
10	*	Notarized Affidavit	3/1/2011			
11		Business Entity Certification				
12	*	E-Verify Memorandum of Understanding	3/1/2011			
13	*	Nutritionist Pre-approval Visit	3/1/2011			
14	*	New Sponsor Training Attendance	3/1/2011			
15	*	Policy Statement	3/1/2011			
16	*	Direct Deposit Form	3/1/2011			
17	*	Vendor Input Form	3/1/2011			

- Status of Information Sheets and Budget should now be *Pending Approval*. At this point your application has been properly submitted to the state.

	Pac	or Summary ket Applications Claims	Payments	U:	sers
tem	Req	On-Line Forms Description	Count/Date	S	tatus
1	*	Sponsor Information Sheet		Ар	proved
2	*	Sponsor Budget Form		Ар	proved
3	*	Site Information Sheet		Approved	
4		Forms Submitted to State for Approval	2/9/2011	Ар	proved
5		Forms Approved by the State	2/9/2011	Ар	proved
tem	Req	Off-Line Forms Description	Date Sent	Date Received	Date Complete
6	*	Geographical Boundary Map	3/1/2011	3/5/2011	3/5/2011
7		Documentation of 501(c)(3) Status			
8	*	Food Service Contract	3/1/2011	3/5/2011	3/5/2011
9		Enrollment Form			
10		Contract			
11	*	Notarized Affidavit	3/1/2011	3/5/2011	3/5/2011
12		Business Entity Certification			
13	*	E-Verify Memorandum of Understanding	3/1/2011	3/5/2011	3/5/2011
14	*	Nutritionist Pre-approval Visit	3/1/2011	3/5/2011	3/5/2011
15	*	New Sponsor Training Attendance	3/1/2011	3/5/2011	3/5/2011
16	*	Policy Statement	3/1/2011	3/5/2011	3/5/2011
17	*	Direct Deposit Form	3/1/2011	3/5/2011	3/5/2011
18	*	Vendor Input Form	3/1/2011	3/5/2011	3/5/2011

Please feel free to check back on the Sponsor Summary page to review your application status. When the Status is *Approved*, your application has been approved by the state. Please note that your update will not be considered complete and will not be approved until all off-line (i.e., paper) forms, if any are required, have been received by the Bureau of Community Food and Nutrition Assistance.

Tips for Navigating the Web-Based System

- 1. Do not use your Internet Explorer's Back button. Use the menu (in the blue section) on the top left of the screen, or use the "breadcrumb trail," (under the blue bar) to navigate from screen to screen.
- 2. Each time you submit the info sheet or claim, no matter if it has errors, it is saved on the server, and will be there if you need to leave or logoff and come back.
- 3. Use the Tab key to navigate from field to field, or use your mouse to point and click into the field you want to complete. Try not to use your Enter key. If you do, the info sheet or claim will submit (in an error status).
- 4. If you are in View mode, changes won't be saved. If you want to make changes, make sure you are in Edit or Revise mode.
- 5. Claim revisions are filed after the original (or previous revision) is in *Paid* status.

User Notes

- 1. Click the Users tab to view individuals who have access to submit application and claim information for your organization.
- 2. Inform the Bureau of Community Food and Nutrition Assistance <u>immediately</u> if an individual with access to the SFSP web-based system is leaving your organization so that access may be revoked.
- 3. Submit a Network User Access Request form to request online access for new employees.
- 4. User IDs and passwords are assigned to individuals only, and may not be shared.